

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

(571) 273-2885 or Fax

PEC 9.2 2 1005 FOLEY AND LARDNER SUITE 500 3000 K STREET NW WASHINGTON, DC 20007 PE11501 1400,00 IP PE11501 1400,00 IP PE11501 1501 1501 1501 1501 1501 1501 150	FOLEY AND LAR SUITE 500 3000 K STREET NW WASHINGTON, DC 1/23/2005 MDAMTE2 000001 FC:1501 FC:1504 APPLICATION NO. 09/733,033 TITLE OF INVENTION: POR	CDNER V 20007 73 09733033 1400.00 0P 300.00 0P FILING DATE 12/11/2000	FII	2 2 2005	papers. Each addition have its own certifica Co I hereby certify that to States Postal Service addressed to the Matransmitted to the US	al paper, such as an assignme of mailing or transmission. rtificate of Mailing or Tran his Fee(s) Transmittal is bein with sufficient postage for fin il Stop ISSUE FEE address PTO (571) 273-2885, on the	smission g deposited with the United rst class mail in an envelope s above, or being facsimile date indicated below. (Depositor's name) (Signature)
FOLEY AND LARDNER SUITE 500 3000 K STREET NW WASHINGTON, DC 20007 2/23/2005 HDARIE2 00000173 09733033 IFC:1501	FOLEY AND LAR SUITE 500 3000 K STREET NW WASHINGTON, DC 1/23/2005 MDAMTE2 000001 FC:1501 FC:1504 APPLICATION NO. 09/733,033 TITLE OF INVENTION: POR	CDNER V 20007 73 09733033 1400.00 0P 300.00 0P FILING DATE 12/11/2000	FII	2 2 2005	I hereby certify that the States Postal Service addressed to the Matransmitted to the US	rtificate of Mailing or Tran his Fee(s) Transmittal is bein with sufficient postage for fin il Stop ISSUE FEE address PTO (571) 273-2885, on the	smission ng deposited with the United rst class mail in an envelope s above, or being facsimile date indicated below. (Depositor's name) (Signature)
SUITE 500 3000 K STREET NW WASHINGTON, DC 20007 2/23/2005 MBMITE2 00000173 09733033 1F.1.1501	SUITE 500 3000 K STREET NW WASHINGTON, DC 2/23/2005 MDANTE2 000001 FC:1501 FC:1504 APPLICATION NO. 09/733,033 TITLE OF INVENTION: POR	73 09733033 1400.00 0P 300.00 0P FILING DATE	FII	2 2 2005	I hereby certify that to States Postal Service addressed to the Ma transmitted to the US	his Fee(s) Transmittal is bein with sufficient postage for fiil Stop ISSUE FEE address PTO (571) 273-2885, on the	ng deposited with the United rst class mail in an envelope s above, or being facsimile date indicated below. (Depositor's name) (Signature) (Date)
addressed to the Mail Stop ISSUE FEE address above, or being facsimited to the USPTO (571) 273-2855, on the date indicated below. APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO.	3000 K STREET NW WASHINGTON, DC 2/23/2005 MDANTE2 000001 FC:1501 FC:1504 APPLICATION NO. 09/733,033 TITLE OF INVENTION: POR	2 20007 73 09733033 1400.00 0P 300.00 0P FILING DATE 12/11/2000	FII	RST NAMED I	addressed to the Matransmitted to the US.	Il Stop ISSUE FEE address PTO (571) 273-2885, on the	s above, or being facsimile date indicated below. (Depositor's name) (Signature)
WASHINGTON, DC 20007 ### Composition of the USPTO (\$71) 273-2885, on the date indicated below. Composition number Composition Composition number Composition Compositi	WASHINGTON, DC 2/23/2005 MDAMTE2 000001 FC:1501 FC:1504 APPLICATION NO. 09/733,033 TITLE OF INVENTION: POR	2 20007 73 09733033 1400.00 0P 300.00 0P FILING DATE 12/11/2000	FII	RST NAMED I			(Depositor's name) (Signature) (Date)
Prince Total Tot	2/23/2005 MDAMTE2 000001 FC:1501 FC:1504 APPLICATION NO. 09/733,033 TITLE OF INVENTION: POR	73 09733033 1400.00 0P 300.00 0P FILING DATE 12/11/2000	FII	RST NAMED I	INVENTOR	ATTORNEY DOCKET NO.	(Signature) (Date)
Fc:1504	APPLICATION NO. 09/733,033 TITLE OF INVENTION: POR	300,00 0P FILING DATE 12/11/2000			INVENTOR	ATTORNEY DOCKET NO.	(Date)
APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 09/733,033 12/11/2000 Massaki Nishino 040447/0227 2515 TITLE OF INVENTION: PORTABLE INFORMATION TERMINAL EQUIPPED WITH CAMERA APPLN. TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE	APPLICATION NO. 09/733,033 TITLE OF INVENTION: POR	FILING DATE 12/11/2000			INVENTOR	ATTORNEY DOCKET NO.	<u> </u>
APPLN. TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1400 \$300 \$1700 12/22/2005 EXAMINER ART UNIT CLASS-SUBCLASS	TITLE OF INVENTION: POR		I TERMINAL EQUI	Masaaki N			CONFIRMATION NO.
APPLN. TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1400 \$300 \$1700 12/22/2005 EXAMINER ART UNIT CLASS-SUBCLASS HO, TUAN V 2615 348-376000 1. Change of correspondence address or indication of "Fee Address" (37 CPR 1.363). Change of correspondence address (or Change of Correspondence Address or PTO/SB/47, Rev 03-02.0 or more recent) attached. Use of a Customer PTO/SB/47, Rev 03-02.0 or more recent) attached. Use of a Customer PTO/SB/47, Rev 03-02.0 or more recent) attached. Use of a Customer PTO/SB/47, Rev 03-02.0 or more recent) attached. Use of a Customer PTO/SB/47, Rev 03-02.0 or more recent) attached. Use of a Customer PTO/SB/47, Rev 03-02.0 or more recent) attached. Use of a Customer PTO/SB/47, Rev 03-02.0 or more recent) attached. Use of a Customer PTO/SB/47, Rev 03-02.0 or more recent) attached. Use of a Customer PTO/SB/47, Rev 03-02.0 or more recent) attached. Use of a Customer PTO/SB/47, Rev 03-02.0 or more recent) attached. Use of a Customer PTO/SB/47, Rev 03-02.0 or more recent) attached. Use of a Customer PTO/SB/47, Rev 03-02.0 or more recent) attached. Use of a Customer PTO/SB/47, Rev 03-02.0 or more recent) attached. Use of a Customer PTO/SB/47, Rev 03-02.0 or more recent) attached. Use of a Customer PTO/SB/47, Rev 03-02.0 or more recent) attached. Use of a Customer PTO/SB/47, Rev 03-02.0 or more recent) attached. Use of a Customer PTO/SB/47, Rev 03-02.0 or more recent) attached. Use of a Customer PTO/SB/47, Rev 03-02.0 or more recent) attached. Use of a Customer PTO/SB/47, Rev 03-02.0 or more recent) attached. Use of a Customer PTO/SB/47, Rev 03-02.0 or more recent) attached. Use of a Customer PTO/SB/47, Rev 03-02.0 or more recent) attached. Use of a Customer PTO/SB/47, Rev 03-02.0 or more recent) attached. Use of a Customer PTO/SB/47, Rev 03-02.0 or more recent) attached. Use of a Customer PTO/SB/47, Rev 03-02.0 or redit and yoverpayment, to Deposit Account Number 19-0741 (enclose an extra copy of this form).		TABLE INFORMATION	I TERMINAL EQUI		Masaaki Nishino		2515
EXAMINER						1	L
HO, TUAN V 2615 348-376000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Cornespondence Address form PTO/SB/122) attached. The Address indication (or "Fee Address" Indication form PTO/SB/122) attached. The Address indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) NEC CORPORATION Please check the appropriate assignee category or categories (will not be printed on the patent): 3. ASPHICATION Please check the appropriate assignee category or categories (will not be printed on the patent): 3. APPHICATION Please check the appropriate assignee category or categories (will not be printed on the patent): 3. ASPHICATION Please check the appropriate assignee category or categories (will not be printed on the patent): 4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): 3. ASPHICATION Please check the appropriate assignee category or categories (will not be printed on the patent): 4b. Payment of Fee(s): 4c) A check in the amount of the fee(s) is enclosed. 4c) Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 19-0741 (enclose an extra copy of this form). 5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27(g)(2).	nonprovisional	nonprovisional NO			\$300	\$1700	12/22/2005
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) NEC CORPORATION TOKYO, JAPAN Please check the appropriate assignee category or categories (will not be printed on the patent): Individual	EXAMINER		ART UNIT		CLASS-SUBCLASS]	
CFR 1.363). Change of correspondence address (or Change of Correspondence Address furn PTO/SB/122) attached. The Address of m PTO/SB/122 attached. The Address of m PTO/SB/	HO, TUAN V		2615		348-376000		<i>:</i>
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" Indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. "See Address" Indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. "See Address" Indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. "See Address" Indication (or "Fee Address" Indication form pto/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. "See Address" Indication (or "Fee Address" Indication form pto/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required attorneys or agents. If no name is listed, no name will be printed. "See Address" Indication for "Fee Address" Indication form pto/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required attorneys or agents. If no name is listed, no name will be printed. "See Indication for pto/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required attorneys or agents. If no name is listed, no name will be printed. "See Indication for pto/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is printed attorneys agents. If no name is listed, no name will be printed. "See Indication for pto/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is printed. "See Indication for pto/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is part of the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignee is identified below, the		ddress or indication of "Fe	ee Address" (37	2. For printing	ng on the patent front page, l	ist . FOT EX	7 S TADDNED IID
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) NEC CORPORATION TOKYO, JAPAN Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government 4a. The following fee(s) are enclosed: Discussion of the fee(s) is enclosed. Payment of Fee(s):	_ ′	Correspondence (1) the names of u			nt attorneys 1 FOLE	L & LARDNER LLP	
PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) NEC CORPORATION TOKYO, JAPAN Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government 4a. The following fee(s) are enclosed: D D D D				(2) the name	e of a single firm (having as	a member a 2	
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) NEC CORPORATION TOKYO, JAPAN Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government 4a. The following fee(s) are enclosed: Jesue Fee	PTO/SB/47: Rev 03-02, or r	of a Customer 2 registered patent attorneys or agents. If no name is 3					
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) TOKYO, JAPAN Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government 4a. The following fee(s) are enclosed: Issue Fee Issue Fee Publication Fee (No small entity discount permitted) Advance Order - # of Copies Advance Order - # of Copies The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 19-0741 (enclose an extra copy of this form). 5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.	3. ASSIGNEE NAME AND R	ESIDENCE DATA TO B	E PRINTED ON TH	E PATENT ((print or type)		
NEC CORPORATION TOKYO, JAPAN Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government 4a. The following fee(s) are enclosed: Issue Fee Publication Fee (No small entity discount permitted) Advance Order - # of Copies Advance Order - # of Copies The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 19-0741 (enclose an extra copy of this form). 5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.	PLEASE NOTE: Unless an recordation as set forth in 37	assignee is identified be 7 CFR 3.11. Completion of	clow, no assignee dat of this form is NOT a	ita will appea a substitute fo	er on the patent. If an assign filing an assignment.	nee is identified below, the o	document has been filed for
Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government 4a. The following fee(s) are enclosed: Issue Fee Publication Fee (No small entity discount permitted) Advance Order - # of Copies Advance Order - # of Copies The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 19-0741 (enclose an extra copy of this form). 5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.	(A) NAME OF ASSIGNEE		(B) I	RESIDENCE	: (CITY and STATE OR CO	UNTRY)	
4a. The following fee(s) are enclosed: □ Issue Fee □ Publication Fee (No small entity discount permitted) □ Advance Order - # of Copies □ Advance Order - # of Copies □ Advance In Entity Status (from status indicated above) □ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.	NEC CORPORATION	1	TO	0KY0, J	APAN		
□ Issue Fee □ □ A check in the amount of the fee(s) is enclosed. □ Publication Fee (No small entity discount permitted) □ Payment by credit card. Form PTO-2038 is attached. □ Advance Order - # of Copies □ □ □ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 19-0741 (enclose an extra copy of this form). 5. Change in Entity Status (from status indicated above) □ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. □ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).	Please check the appropriate as	signee category or catego	ries (will not be print	ted on the pate	ent): 🗖 Individual 🖾 (orporation or other private gr	roup entity Government
☐ Payment by credit card. Form PTO-2038 is attached. ☐ Advance Order - # of Copies ☐ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 19-0741 (enclose an extra copy of this form). 5. Change in Entity Status (from status indicated above) ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).	4a. The following fee(s) are end	closed:		•	` '	-	
Advance Order - # of Copies				_			
5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).	_						
a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).	☐ Advance Order - # of Co	opies	<u>k</u>	☐ The Direct Deposit Accou	tor is hereby authorized by ant Number 19-0741	charge the required fee(s), or enclose an extra of	credit any overpayment, to copy of this form).
			_	b. Applican	nt is no longer claiming SMA	LL ENTITY status. See 37 C	CFR 1.27(g)(2),

Registration No. 26,257 Typed or printed name <u>Blumenthal</u> This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Reg. No. 38,819